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ABSTRACT

To initiate a primary prevention program in a Midwestern urban community consisting primarily of Chicanos, needs were assessed by conducting focus group meetings with school administrators, teachers, parents, and children in a public school setting. In each student focus group, 8-10 children were selected from a seventh-grade classroom, an eighth-grade classroom, and a mixed seventh/eighth-grade bilingual classroom. Fifteen parents participated in the parent group, and 6 teachers comprised the teacher group. Aspirations included academic achievement; the desire to attend a "good" high school, which students defined as a public magnet high school with advanced curriculum and no gang violence; occupations that would provide financial stability; good health; and personal safety. Barriers to aspirations included peer pressure to engage in risky behaviors such as drugs, sex, or gang membership; interpersonal and random violence; a lack of interpersonal relationships with significant adults such as parents, older siblings, or teachers; inaccessible teachers; and low self-confidence. Community strengths identified included the school as a safe haven, healthy personal relationships, community programs, and after-school activities. Implications for prevention programming include forging more personal relationships between teachers and families; initiating policy changes and interventions to counteract violence problems; integrating self-confidence, assertiveness, and communication training into school programs; and providing more after-school activities. (Contains 20 references.) (TD)

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Aspirations, Barriers, and Community Strengths: A Qualitative Survey of Urban Chicano Youth and Families

by Elizabeth M. Vera, Ph.D.
Loyola University Chicago

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Abstract:

This presentation will describe the content of interviews conducted with Chicano children, adolescents, and their families who reside in an urban community and attend local public schools. The goal of these interviews was to have the community identify aspirations it had for the children, barriers which may impede progress toward these goals, and resources both available and needed which would serve to enhance community life. The importance of family, relationships, issues of personal safety, and the school as a central component of the community were among the topics discussed in the interviews. Areas of consensus and divergence among the various participants will be highlighted and the implications for prevention planning will be discussed.

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Aspirations, Barriers, and Community Strengths: A Qualitative Survey of Urban Chicano Youth and Families

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The Julian Samora Research Institute is the Midwest's premier policy research and outreach center to the Hispanic community. The Institute's mission includes:

- *Generation of a program of research and evaluation to examine the social, economic, educational, and political condition of Latino communities.*
- *Transmission of research findings to academic institutions, government officials, community leaders, and private sector executives through publications, public policy seminars, workshops, and consultations.*
- *Provision of technical expertise and support to Latino communities in an effort to develop policy responses to local problems.*
- *Development of Latino faculty, including support for the development of curriculum and scholarship for Chicano/Latino Studies.*

Aspirations, Barriers, and Community Strengths: A Qualitative Survey of Urban Chicano Youth and Families

Professional psychology has long been characterized by the provision of psychotherapeutic services to a variety of client populations. There is little doubt of the effectiveness of such activities for those individuals who participate in psychotherapy (Seligman, 1995), there is considerable debate regarding whether psychotherapy is the most effective way of providing services to ethnic minorities and the poor. Especially when one considers the disproportionate percentages of individuals from ethnic minority groups who suffer from specific mental health problems, the efficiency of delivering psychological services becomes a critical question for psychologists committed to serving historically marginalized groups.

Among the alternative approaches to psychotherapy, primary prevention and community outreach have been successful means of reaching ethnic minority and/or poor client populations (Atkinson, Thompson, and Grant, 1993; Daniels, 1995; Lewis, Lewis, Daniels, and D'Andrea, 1998). Many scholars have argued the importance of engaging in such activities. Conyne (1987) described the field's traditional reliance on psychotherapy as a "no-win" situation due to the need/supply imbalance. While therapy is effective for individuals who have already experienced problems, it does nothing to reduce the number of new cases. Thus, he believes that preventive strategies are the field's best hope for averting problem occurrence in the first place.

Sue (1995), in his chapter of the *Handbook of Multicultural Counseling*, stated that psychologists are frequently placed in the position of treating clients who represent the aftermath of failed and oppressive policies and practices. As a result, psychologists have been trapped in the role of remediation. He argued that taking a proactive and preventative approach to attacking the cultural and institutional bases of the oppression is critical to the mission of psychology.

Atkinson et al. (1993) presented a model of service provision which included outreach work, consultation, facilitation of self-help or indigenous support, and community advocacy as viable alternatives to psychotherapy. Their 3-dimensional model provided a blueprint for psychologists which would aid in making decisions about which types of service might be most useful to an ethnic minority client.

Lewis et al. (1998) have also provided a comprehensive model of how community counselors can engage in activities such as client advocacy, prevention education, consultation and outreach, and public policy making as ways of empowering culturally diverse populations. Their Community Counseling Model represents a unifying framework for multiple-service approaches which are critical to work with vulnerable populations, such as the poor and ethnic minority communities, and compels counselors to move beyond the narrow scope of the traditional intrapsychic-individual intervention model.

Despite the existence of these models and eloquent arguments for a shift away from psychotherapy as a primary service, psychologists and counselors continue to spend a disproportionate amount of time engaged in individual counseling (Fitzgerald and Osipow, 1986; Humphreys, 1996; McNeil and Ingram, 1983). Aubry and Lewis (1988) contend that, despite the increase in group-based intervention strategies, counselors continue to overlook the importance of environmental context, distrust the effectiveness of prevention interventions, and continue to narrow the scope of their attention to the individual psyche. Such a narrow focus often fails to maximize human resources and analogously, "throws out a much smaller net," making it difficult to reach a significant proportion of individuals who are in need of help (Lewis et al., 1998).

Yet despite the overall ambivalence that the profession has for the utilization of preventive strategies, there exist many excellent examples of preventive, community-based, broad-reaching professional activities such as school-to-work programs, academic achievement enhancement programs, and drug and alcohol abuse prevention programs. These programs have often required professional psychologists (via university affiliation) to establish relationships with community organizations which have allowed for the delivery of services *in* the community. Thus, community members have not been responsible for seeking out or necessarily providing financial compensation for services. For a comprehensive example, see the Boston College Model described by Brabeck, Walsh, Kenny, and Comilang (1997).

Engaging in community-based prevention efforts though is not in and of itself a sufficient solution to reaching historically underserved communities. Such efforts are not necessarily free of biases and within these alternative types of service delivery, there is still a great potential to perpetuate racist and classist assumptions if we approach our communities from a deficit-perspective, where we patriarchally attempt to "save" communities otherwise doomed to failure. Unfortunately, this mindset is not uncommon and has resulted in many university endeavors which have been at best, disrespectful and condescending, and at worst, exploitive. Additionally, the proliferation of short-term contacts with community groups, which usually prioritize data collection overall quality service delivery, have been devastating to the formation of future partnerships. Reiss and Price (1996) argued that successful programs are maintained in communities only when they are owned and supported by community members. For this reason it is necessary to form egalitarian partnerships and negotiate effective and lasting alliances.

Knowing that many of our most underserved communities can be justifiably skeptical of our true motives as members of an institution such as a university, there are ways for us to evidence trustworthiness which involve continuous collaboration and a dismantling of the notion of university-community hierarchy. Lerner (1995) has spoken at great length about the ways in which community collaborations can be mutually beneficial and based on the assumption that community members themselves are powerful agents of change and have the knowledge to address many existing problems. He has identified eight characteristics of successful prevention programs which incorporate this philosophy.

One must first start with understanding the needs and aspirations of the community, including community members in the process of organizing and implementing programs. This means that community members, as the primary stakeholders must be asked to identify and describe problems, articulate goals, and define the issues which need to be addressed. Second, it is important to develop trusting relationships between the university and the community by making long-term commitments and addressing overtly the ways in which the community may have been taken advantage of in the past. Third, issues of diversity and the sociocultural context of the community being served must be addressed.

Fourth, relationships between multiple parts of the community system (families, teachers, community members) must be promoted. Fifth, quality programs must enhance what is referred to as the "4C's" — *Competence, Connection, Character,* and *Confidence* of the participants. Sixth, multiple evaluation methods which are guided by the values, norms, and aspirations of the community must be used. Seventh, the existing strengths of the community (i.e., what is working), must be utilized, versus a myopic focus on what is wrong or missing from the community.

Last, answers to problems in the community must be conceptualized in systemic as well as individual ways. In the following approach, community members, as the main stakeholders in the community, have to be involved in every stage of the process when planning any programs or interventions. We cannot assume to know what is needed in any given community. Rather, we must begin by listening, then offering our ideas, intentions, and willingness to join forces to combat problems.

One example of a project in which I participated as a student provides an example of how the focus of the researchers can frequently be inconsistent with the needs of the community. In this project, the investigators were interested in the topic of HIV prevention in a poor, public housing community comprised of African American families. On the first day of con-

tact with the community, which occurred through the local public elementary school, the university researchers approached the children in a group format. Almost immediately, a child asked "are you here to keep us from getting shot?" Another student asked, "are you here to help us get the gangs out of the neighborhood?" Unfortunately, based on the purpose of the research project, the answer to these questions was "no." However, these children were speaking to the issues they felt were most urgent to their overall health and future. Certainly HIV prevention was *a* concern for the children and their families, but it was one of many and not at the top of *their* list. This demonstrates how the researchers did not talk to their target population before proposing their project and one could speculate that the community's investment in such a project may be less than optimal.

Another critical consideration is the importance of evaluation in both the enhancement of initially successful programs and the discontinuation of programs found to be unsuccessful. The ways in which this evaluation can occur depend on the philosophy of the programmers. In many cases, evaluation has occurred by identifying variables which might measurably change as a result of the program (e.g., incidents of violence within the classroom, number of teenage pregnancies). However, the evaluation process should be co-determined by both the programmers and the community participants. This process of collaborative evaluation is known as Development-In-Context Evaluation (Lerner, 1995) or Participatory-Normative Evaluation (Weiss and Greene, 1992). Essentially, these types of evaluation emphasize the follow:

1. building on the values and meaning systems of the stakeholders in the community.

2. engaging the community participants as partners in the evaluation.

3. using the information to refine and modify the program such that its effectiveness is enhanced in future applications.

Based on this philosophy, the following section describes the methodology and qualitative results of a needs assessment which was conducted to initiate a primary prevention program project which has been in existence for two years now in an urban community in the Midwest. The population of the community is primarily Chicano and the neighborhood is underresourced in many ways. The data themselves, as well as the interview processes, illustrate concepts of the Development-In-Context (DIC) Approach (Lerner, 1995) in action.

Methodology

To reiterate, the underlying principle of the DIC approach is to work with community members to identify the problems or issues to which the program will be directed (Lerner, 1995). In our program, this information was gathered by conducting focus group meetings with school administrators, teachers, parents, and seventh and eighth grade children through an urban public school setting. The school was chosen as the community base because it is one environment which centralizes the community members who have children of elementary school age. The school is in an ethnically and socioeconomically mixed neighborhood, but the students who attend the school are largely Latino (67%). Most are Chicanos, with some Puerto Ricans, and a smaller number of children whose families come from the Dominican Republic, Honduras, Guatemala, and El Salvador. Another 10% of the students are from White ethnic groups, 10% are African American, 10% are Asian Ethnic groups, and 3% are Native American. Over 90% of the children are from families with cumulative incomes below the national poverty level, according to enrollments in free lunch programs as reported by school personnel. Children were selected for focus group participation initially by voluntary basis and, in classrooms where there were too many volunteers, school administrators and teachers identified children who were very expressive and who would be likely to offer their ideas freely.

Parents were solicited for participation by both written (bilingual) communication and in-person invitation by teachers and school administrators who came in contact with them during the solicitation time-frame. Parents who attended the focus groups did so on a voluntary basis, without compensation, and presumably included parents who did not work outside the home and whose work schedules allowed for them to attend. Childcare was provided for parents who brought their toddlers. Due to the small number of teachers in the selected grades, all teachers participated in a focus group to solicit their input.

Table 1. RESULTS OF CONTENT ANALYSIS

STUDENTS	PARENTS	TEACHERS
Goals/Aspirations:		
Graduation	Good education	Good education
Getting into a good high school	Success in future	Successful in life
Getting high grades	Safety	Staying focused on positive goals
Career and money	Good Health	Avoiding negative risks
Having a family	Happiness	
Going to college		
Barriers to Achievement:		
Peer pressure: gangs, drugs, sex	Temptations of drugs, alcohol, gangs, and crime	Poor decisions about school behavior
Poor relationships with parents, teachers	Poor adult role models Unavailable parents	Problematic peer relationships
Safety from violence	Violence/Safety	Lack of parental control
No self-confidence	Teacher indifference	Peer pressure
Not qualifying for good high schools	Fear of high schools No hope, Goals	No respect, hope
Support/Assistance		
People to go to	After-school programs	School as a haven
Afternoon activities	Family	Connecting with mentors
Decision Making Skills	Libraries	High expectations
Evaluating Outcomes		
Self-confidence	Clarity/Confidence about future	Self-discipline
Better relationships	Better relationships with Adults	Better relationships
Academic Success		

In each student focus group, eight to 10 children were selected from each of three classrooms: one seventh grade room, one eighth grade room, and one of the mixed seventh and eighth bilingual classrooms. This number of children was selected based on guidelines for successful focus groups (Morgan, 1993). For the parents group, 15 parents participated and six teachers comprised the teachers group. Groups were conducted in Spanish with the bilingual classroom focus group and the parents group. Groups were conducted in English for children in the remaining groups and for the teachers. Group facilitators consisted of graduate students in Counseling Psychology who had Master's degrees and were working toward doctoral degrees. The facilitators for the Spanish-language groups were Chicano and one was White. For the English-language groups, the facilitators were of various ethnic groups including African American, White, and Latino groups. The teachers group was lead by a Chicano psychologist.

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In each group meeting, open-ended questions guided the discussions including, "what goals do you have for you/your children's futures," and "what might prevent you/your child from achieving those goals?" In addition, the community stakeholders were asked to identify problems affecting the children in and out of the school, and to identify the resources and personnel in the community which were seen as strengths. This qualitative method of data collection allowed for an analysis stressing the convergence of common themes cited in each group.

Results

As can be observed in Table 1, the qualitative results are broken down into themes and are presented by topic (e.g., goals, barriers) and by constituency group (e.g., students, parents) The focus group interviews were initially transcribed from audio tapes and were then analyzed in a discovery-oriented manner (Mahrer, 1988) which allowed for themes to be identified from the data set.

Aspirations

There was great consistency between the goals and aspirations described by each constituency group. One theme voiced in every focus group was the importance of academic achievement. For children, such goals included earning high grades, graduating from eighth grade, finishing high school, and attending college. One theme discussed in the students' focus groups was the desire to attend a "good" high school. This refers to the students' desire to attend a public magnet high school, which has a more advanced curriculum and is highly competitive. Few of these children aimed to attend private or parochial schools mainly due to financial constraints. Also included in the students' identification of "good" high schools were public schools which did not have reputations for gang violence problems. The local neighborhood high school was known to have significant problems in this area.

Career aspirations were also described by the research participants which included many so-called "white collar" occupations such as teachers, doctors, and lawyers. Several other students mentioned career aspirations in professional sports and the performing arts (e.g., singers, dancers). Often these occupations were identified as ones which would provide financial stability or prosperity and, as one student described, "give you enough money to take care of yourself and your family." In addition to academic and career aspirations, good health and personal safety goals arose as themes from the data. In particular, the parents' focus group members discussed their desire for their children to "grow up and be healthy" and avoid the community violence which could compromise their well-being.

Barriers to Reaching Aspirations

When quarried about potential barriers which might impede progression toward one's goals, students in particular seemed well aware of the potential costs of becoming involved, or "getting caught up" in risky behaviors (e.g., taking drugs, having sex, or joining a gang). The students tended to associate each of these various behaviors with an inability to handle peer pressure.

Violence and personal safety issues represented a second theme which arose in this category. Each of the various focus groups identified interpersonal and random violence as serious impediments to future success. This was connected in many cases to the various high schools students had applied which would require them to leave their own neighborhood and spend their school hours in "better" neighborhoods (i.e., neighborhoods perceived as being safer).

A lack of interpersonal relationships with significant adults, such as parents, older siblings, or teachers was a third theme in this category. For the students, this often was referred to as "having no one to talk to." However, the parents and teachers tended to attribute this lack of connection to the unavailability of parents. In some cases, this was due to the extraordinary hours parents spent working at one or more jobs. In other cases, according to both the teacher and parent participants, this was due to problems the adults had which compromised their ability to be available to their kids (e.g., substance abuse problems, mental health problems). One parent noted that part of the problem is with the parents who aren't in attendance, but who could have been. "What are they doing right now?" Another parent asked, "if there are drugs and alcohol in the house, how are the kids supposed to learn that it is wrong?"

Several of the teachers also noted that if the parents were not "in control" of the children, there is no reason to expect the students to be self-disciplined in school. One teacher remarked, "you get kids who are out in the streets at 12:30 in the morning, and you have to wonder why no one has called the police." Thus, a substantial amount of time in the parent and teacher focus groups was spent discussing the role of family and parents as either being beneficial or detrimental to the child's ability to have future success.

A fourth theme which arose from conversations from the students and parents was the characterization of the teachers as being inaccessible. In particular, one parent expressed a concern that "these kids are afraid of their teachers" and should not be. They should be able to go to them with their problems or with questions. "I wish they (the teachers) would start out the day for a few minutes by asking 'how are you all doing today, is anything happening?'" Students reiterated this theme in characterizing their teachers as being primarily interested in their academic performance, but not necessarily knowing them as individuals.

A fifth theme which arose in every focus group was the topic of self-confidence. There was a general concern about the impact of not believing in oneself or having hope for the future. One parent noted that some of these kids "can't see more than three options — hanging out in the street, going to prison, or getting killed." The teachers shared examples of kids who seemed bored with everything and had no focus in their lives. Even the students themselves stated that one cannot realize a dream without confidence and clarity about one's goals.

Community Strengths/Sources of Support

There was a strong feeling on behalf of the teachers that the school itself served as a resource or "safe haven" for the community. They noted they have high expectations of their students and low tolerance for negative behaviors. There were also no significant problems with violence within the school itself. Because of this, teachers believed the school had the potential to provide the children with the environment and structure they needed to be successful.

The parents seemed to believe that healthy personal relationships are an important resource for the children, including peer relationships, student-teacher relationships, and parent-child relationships. These personal connections were said to be vital in providing needed support, guidance, and concern for the children in both good times and bad.

Another identified resource included existing community programs and after-school activities (e.g., park district sports, mentoring programs). Public libraries were also mentioned as being utilized by the children and their families. Having somewhere to go and something to do was stated by the parents and children as being critical resources. While some of the children in the community were already involved in such activities, there was a stated need for more programs to be available and accessible. While the parents mentioned that some churches had available social services, most of what was offered was utilized by adults (e.g., naturalization services, meal programs) and there were few activities for children.

Definitions of a Successful Program

There were some concrete measures of evaluation that were suggested by the focus group participants. Included in these measures were academic markers (i.e., receiving better grades), personal markers (i.e., having more confidence and clarity about the future), and behavioral or skill-based markers (i.e., being able to handle problems better, make better decisions). These suggestions consistently came from parents, teachers, and the students themselves and indicated that community members were clear about their expectations of successful children.

Discussion and Implications for Future Prevention on Programming

There was a striking consistency to the responses by each group of focus group participants (i.e., children, parents, and teachers). All the participants displayed a clear investment in the children's future and were committed to personal, academic, and vocational types of success. This was certainly not a surprising finding, but it is worth reiterating the point in times where media reports profess that Chicano values are different from "mainstream" values which contribute to alarming levels of school dropout.

The themes of relationship building and shared responsibility for raising healthy children were also evidenced. The values inherent in such themes are consistent with traditional Mexican values of familia and personalismo. That is, children and parents expressed a desire for a more personal relationship between the teachers and families, versus a strictly "professional" relationship which focused solely on the academic performance of the children. Given that the majority of teacher-parent and teacher-student conversations occur in response to either behavioral problems or regular performance evaluation (e.g., picking up report cards, parent-teacher conferences), prevention programmers could respond to such a request by organizing and facilitating regular meetings between parents and teachers (perhaps in both group and individual formats) which would allow for such relationships to be formed.

While all the participants acknowledged a shared responsibility for the well-being of children, it appeared that the teachers held the parents mostly responsible for the future successes of their children. This sentiment may not be universally shared by all teachers but may reflect varying views on the role of schools in the lives of children. While some (Lerner, 1995) advocate for the service of schools to be more holistic (i.e., inclusive of medical, psychological, or public services), others may believe that schools should stay focused on the academic development of its pupils. Perhaps this latter view was one espoused by some the teachers in this sample. However, no direct line of questioning explored this possibility and teachers did not have an opportunity to fully explain their views.

On the topic of barriers to success, the themes of violence and personal safety were consistently raised by the participants. While there are certainly many systemic and public policy changes which are needed to powerfully attack this problem (e.g., decreasing the availability of guns in the neighborhoods, creating employment opportunities for our youth and adults, increasing the reliability of our police departments), there are also interventions which might be of use to community members in counteracting violence problems in interpersonal relationships. Among these interventions are conflict resolution skills training, anger management, increasing awareness of domestic violence, making referrals for families in need, and altering norms regarding children's access to violence in mass media. Such activities could be part of prevention programs offered to the children and families in group settings.

Another potential barrier expressed by the participants involved problems of self-confidence and goal development. While access to information and financial resources which would help children to realize such dreams are essential components of future success, programs which develop self-confidence, self-efficacy, and self-esteem could be integrated into programs offered within the schools. Similarly, prevention programming staff could assist in interventions aimed at future career exploration and goal-setting as well.

Peer pressure was also viewed as a potential barrier and a desire to learn how to better handle such situations was expressed. Assertiveness training and communication skills training are examples of programs which might be integrated into the school curriculum to strengthen the children's competency to handle peer pressure.

Finally, better access to after-school activities was voiced as a need and one response from prevention specialists could be to expand existing programs (e.g., park district sports and after-school mentoring) by recruiting volunteers from the community and from universities. Additionally, prevention programmers could begin working with local community agencies to develop community projects which would involve the children, such as neighborhood beautification projects, peer mentoring, and other types of community volunteering.

Regarding methods of evaluation, the data from this investigation underline the importance of surveying multiple parties in the gathering of such data. Including observations of the children, their parents, and teachers seem critical to a thorough assessment of any program's effectiveness. This compliments the existing professional literature which advocates such a method of program evaluation (Conyne, 1987).

Conclusions and Implications for Training

It is important to state that these findings represent the sentiments of a very distinct community sample and may not generalize to all Chicanos. However, the intent of this project's approach was to identify specific needs, strengths, and goals of this community in order to design a responsive primary prevention program. Building a program based on this kind of data is consistent with Lerner's DIC approach to prevention work and allows for a consideration of both individual, family-based, and system-oriented services which could be made available through the school for these community members.

Koss-Chioino and Vargas (1992) described the concept of cultural responsivity in contrast to cultural sensitivity. Cultural responsivity emphasizes being active in our response to our constituents' cultural realities, rather than being passive, and "appreciating" the role of culture in our professional work. In the context of primary prevention program design, Lerner's (1995) DIC seems to embrace a culturally responsive stance.

Utilizing primary prevention strategies in underserved communities requires that prevention and community outreach become an integral part of our training of future psychologists. Skills and knowledge relevant to community outreach, prevention programming, and advocacy need to be represented in coursework and practical training. We must offer our students opportunities to engage such activities and work closely with them to foster healthy relationships with underserved communities. We must facilitate the process of becoming better community advocates by requiring ourselves to be familiar with community resources and how various public systems work, such that our trainees can assist their clients in advocating for themselves with greater effectiveness. This supplemental training emphasis would not diminish the importance of sound therapeutic skills which incorporate an understanding of diverse cultures. However, if we must accept that counseling and psychotherapy only reach a small proportion of poor and ethnic minority communities, expanding our roles as practitioners is necessary.

Community psychologists have long insisted emotional distress and mental disturbance in our society is a function of the dehumanizing influences of oppression, meaningless work, racism, and sexism (Albee, 1982). Thus, prevention, advocacy, and ultimately social policy change must be at the forefront of our profession's responses (Fox, 1993).

In forming collaborative partnerships with communities, psychologists become better social advocates, which further expands our roles within communities. There is a clear need for psychologists to move beyond the confines of psychotherapy as our sole source of service delivery if we are committed to improving the lives of Chicanos and other ethnic minority groups. Approaches such as the DIC (Lerner, 1995) are excellent models of how to shift our service delivery systems to an emphasis on culturally relevant prevention.

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